

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45220

Entity Name: MYSTIC GREENS I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5495 BRYSON DRIVE, SUITE #412
NAPLES, FL 34109

Current Mailing Address:

5495 BRYSON DRIVE, SUITE #412
NAPLES, FL 34109 US

FEI Number: 65-0308593

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MESSINGER, JOEL
5495 BRYSON DRIVE, SUITE #412
NAPLES, FL 34109 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PRESIDENT
Name CORRIVEAU, ROBERT
Address 5495 BRYSON DRIVE, SUITE #412
City-State-Zip: NAPLES FL 34109

Title VICE PRESIDENT / SECRETARY
Name LINK, PATRICK
Address 5495 BRYSON DRIVE, SUITE #412
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name WILEY, WILLIAM
Address 5495 BRYSON DRIVE, SUITE #412
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name STRENK, FRANK
Address 5495 BRYSON DRIVE, SUITE #412
City-State-Zip: NAPLES FL 34109

Title TREASURER
Name WAGNER, SUE
Address 5495 BRYSON DRIVE, SUITE #412
City-State-Zip: NAPLES FL 34109

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SUE WAGNER

TREASURER

04/18/2014

Electronic Signature of Signing Officer/Director Detail

Date